## PART B - FEE(S) TRANSMITTAL

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Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

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05/17/2007

KLARQUIST SPARKMAN, LLP 121 S.W. SALMON STREET SUITE 1600 PORTLAND, OR 97204

## **FILED VIA EFS**

| O9/846,758 OSO/12001 Alex Liu 6616-72618-02  TITLE OF INVENTION: SYSTEM FOR FUNCTIONAL GENE DISCOVERY IN PLANTS  APPLN TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEEKS nonprovisional NO \$1400 \$300 \$0 \$1700  EXAMINER ART UNIT CLASS-SUBCLASS    CLange of correspondence address or indication of "Fee Address" (37   1631 702-019000    Clange of correspondence address (or Change of Correspondence Address or indication of "Fee Address" (37   1631 702-019000    Change of correspondence address (or Change of Correspondence Address from PTO/SSM (22) attached. (2) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) attached. (2) the name of up to 3 registered patent attorneys or agents OR, alternatively. (3) and the names of up to 5 registered patent attorneys or agents OR, alternatively. (4) the names of up to 6 registered patent attorneys or agents OR, alternatively. (4) the names of up to 6 registered patent attorneys or agents OR, alternatively. (4) the names of up to 7 registered patent attorneys or agents OR, alternatively. (4) the names of up to 8 registered patent attorneys or agents OR, alternatively. (5) the name of up to 9 registered patent attorneys or agents OR, alternatively. (5) the name of up to 6 registered patent attorneys or agents OR, alternatively. (6) the name of up to 13 registered patent attorneys or agents. (7) the names of up to 6 registered patent attorneys or agents. (8) alternatively. (8) the name of up to 13 registered patent attorneys or agents. (8) alternatively. (9) the names of up to 14 registered patent attorneys or agents. (8) alternatively. (9) the names of up to 15 registered patent attorneys or agents. (8) alternatively. (9) the names of up to 15 registered patent attorneys or agents. (8) Residence | PPLICATION NO.   | FILING DATE   | ***************************************   | FIRST NAMED INVENTOR  |  | ATTORNEY DOCKET NO.  | CONFIRMATION NO.  |  |  |
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| APPLN TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL PEECS tonprovisional NO \$1400 \$3300 \$0 \$1700  EXAMINER ART UNIT CLASS-SUBCLASS  MORAN, MARJORIE A 1631 702-019000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563)  1. Change of correspondence address or change of Correspondence Address form PTO/SB/1/22) attached.  1. Change of correspondence address (or Change of Correspondence Address from PTO/SB/1/22) attached.  1. Change of correspondence address (or Change of Correspondence Address from PTO/SB/1/22) attached.  1. Change of correspondence address (or Change of Correspondence Address from PTO/SB/1/22) attached.  2. For printing on the patent front page, list (10 the names of up to 3 registered patent attorneys or agents OR, alternatively.  2. For printing on the patent front page, list (11 the names of up to 3 registered patent attorneys or agents OR, alternatively.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  EXElixis Plant Sciences, Inc.  16160 S.W. Upper Boones Ferry Road, Portland Country of the patent of Fee(s): (Please first reapply any previously paid issue assignment of Fee(s): (Please first reapply any previously paid issue assignment of Fee(s): (Please first reapply any previously paid issue of the Director is hereby authorized to charge the required fee(s) are overpayment, to Deposit Account Number (12-4550 (encic) application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.71. The information is required to obtain the applicant; a registered attorney or agent; application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.71. The information is required to obtain the applicant; a registered attorney or agent; application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.71. This collectio |  |   | FIONAL GENE DISCO   | Alex Liu  |  | · · · · · · · · · · · · · · · · · · ·  | 4859  |  |  |
| NO \$1400 \$300 \$0 \$1700  EXAMINER ART UNIT CLASS-SUBCLASS  MORAN, MARJORIE A 1631 702-019000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  1. The Address form PTO/SB/122) attached.  1. The Address form PTO/SB/122) attached.  1. The Address form PTO/SB/122) attached.  2. Fee prainting on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively.  2. Other name of a single firm (having as a member a registered attorney or agents) and the names of up to 2 registered patent attorneys or agents If no name is 3.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type).  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignment is recoordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  EXEMIXES Plant Sciences, Inc.  Please check the appropriate assignce category or categories (will not be printed on the patent): □ Individual □ Corporation or other prival table.  3. At The following fee(s) are submitted: □ A check is enclosed.  3. ASSIGNEE Fee  2. Payment of Fee(s): (Please first reapply any previously paid issue and the payment of   |  |   | HOMAL GENE DISCO  | veky in plants  |  |  |   |  |  |
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| Procedures indication for "Fee Address" Indication form PTO/SB47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, no assignee data will appear on the patent. If an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Exelixis Plant Sciences, Inc.  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private.  4a. The following fee(s) are submitted:  (B) Reynment of Fee(s): (Please first reapply any previously paid issue of the District     | 2.   |   |   | (1) the names of up to 3 registered patent attorneys 1 Klarquist Sparkman LLP   |  |  |   |  |  |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignment is not a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Exelixis Plant Sciences, Inc.  16160 S.W. Upper Boones Ferry Road, Portland A. The following fee(s) are submitted:    Description of this form of the patent     | "Fee Address" indication (or "Fee Address" Indication form   |   |   | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no page is |  |  |   |  |  |
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| PLEASE NOTE: Chless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Exelixis Plant Sciences, Inc.  16160 S.W. Upper Boones Ferry Road, Portland at The following fee(s) are submitted:  At The following fee(s) are submitted:  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 4  Change in Entity Status (from status indicated above)  A check is enclosed.  The Director is hereby authorized to charge the required fee(s), an overpayment, to Deposit Account Number 02-4550 (enclosed.)  OTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent, an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, inch application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, inch application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, inch application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, inch application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, inch application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, inch application. Confidentiality is governed by 35 U.S.C. 125 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, inch and the property of the public control of the University of the public control of the University of the public control of the University of the      | IGNEE NAME A   | ND RESIDENCE DATA   | TO BE PRINTED ON T  | THE PATENT (print or type   | c)   |  |   |  |  |
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| Exelixis Plant Sciences, Inc.  16160 S.W. Upper Boones Ferry Road, Portland Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private As. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue Payment of Fee(s): (Please first reapply any previously paid issue Account Number of Payment of Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously payment of Pee(s): (Please first reapply any previously paid issue Account Payment of Pee(s): (Please first reapply any previously payment of Pee(s): (Please first reapply any previously payment of Pee(s): (Please first reapply any previously payment of Pee(s): (Please first reapply any previ     | NAME OF ASSIC  | INEE  | vi maa torrii 15 110  | (B) RESIDENCE: (CITY  | issignment. and STATE OR CO  | HINTRY)  | 1,2   |  |  |
| Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other privated.  4a. The following fee(s) are submitted:    Solution   Issue Fee   A check is enclosed.   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously paid issue   Payment of Fee(s): (Please first reapply any previously payment of Payment of Fee(s): (Plea     | xelixis Plant  | Sciences, Inc.  |   |   |  | •  | tragon 97224  |  |  |
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| Some states          | following feets)   |   |   |   |  |  |   |  |  |
| Advance Order - # of Copies 4  Advance Order - # of Copies 4  Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  Control of the United States Patent and Trademark Office.  Authorized Signature  Tanya M. Harding, Ph.D.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), an overpayment, to Deposit Account Number 02-4550 (encic feed).  The Director is hereby authorized to charge the required fee(s), an overpayment, to Deposit Account Number 02-4550 (encic feed).  The Director is hereby authorized to charge the required fee(s), an overpayment, to Deposit Account Number 02-4550 (encic feed).  The Director is hereby authorized to charge the required fee(s), an overpayment, to Deposit Account Number 02-4550 (encic feed).  The Director is hereby authorized to charge the required fee(s), an overpayment, to Deposit Account Number 02-4550 (encic feed).  The Director is hereby authorized to charge the required fee(s), an overpayment, to Deposit Account Number 02-4550 (encic feed).   | ssue Fee   |   |   | Payment of Fee(s): (Pleas   | e first reapply any  | previously paid issue fee s  | hown above)   |  |  |
| The Director is hereby authorized to charge the required fee(s), a overpayment, to Deposit Account Number 02-4550 (encic fee(s)). Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 3 creek as shown by the records of the United States Patent and Trademark Office.  Authorized Signature / Tanya M. Harding/  Typed or printed name Tanya M. Harding, Ph.D.  Registration No. 42,630  Typed or printed name Tanya M. Harding, Ph.D.  Registration No. 42,630  In application. Confidentiality is governed by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file ibmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of the confidential case of the complete complete, inches from and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Pat     | Publication Fee (No small entity discount permitted)   |   |   |   |  |  |   |  |  |
| a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 3 CFR 1.27. b. Applicant is no longer claiming SMALL ENT     | dvance Order - #   | of Copies 4   |   |   |  |  |   |  |  |
| Authorized Signature /Tanya M. Harding/  Typed or printed name Tanya M. Harding, Ph.D.  Registration No. 42,630  his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file inspiration. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, inch is form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Patent      | ge in Entity Statu   | is (from status indicated a   | LUUYEI  | overpayment, to Depos   | it Account Number  | 02-4550 (enclose an  | extra copy of this form).   |  |  |
| Authorized Signature /Tanya M. Harding/  Typed or printed name Tanya M. Harding, Ph.D.  Registration No. 42,630  his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file ibmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of the confidence of the complete of     | Applicant claims   | SMALL ENTITY status.  | See 37 CFR 1.27.  | b. Applicant is no longe  | er claiming SMALL  | ENTITY status, See 37 CF   | R 1.27(g)(2)  |  |  |
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